

PTO/SB/21 (01-08)

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FORM**

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Total Number of Pages in This Submission **8**Application Number **10/624,815**Filing Date **July 22, 2003****RECEIVED**First Named Inventor **Sajka****CENTRAL FAX CENTER**Art Unit **2614****JAN 09 2008**Examiner Name **Ovando, Pablo, R**Attorney Docket Number **Tel-048****ENCLOSURES (Check all that apply)**

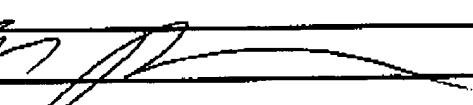
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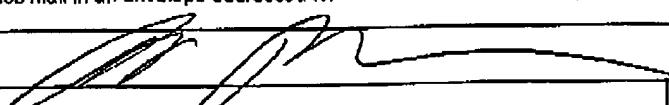
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENTFirm Name **Timothy P. O'Hagan**Signature Printed name **Timothy P. O'Hagan**Date **1-9-08**Reg. No. **1-9-08****CERTIFICATE OF TRANSMISSION/MAILING**

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Signature Typed or printed name **Timothy P. O'Hagan**Date **1-9-08**

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